FOR INSTRUCTIONS, SEE BACK OF FORM

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319

Fax: 515-281-4073

DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form COMMITTEE NAME (Must be same as on Statement of Organization) **FORM** Washington County Citizens for Good Jobs DISCLOSURE DR-2 IMPORTANT: Indicate by # type of committee you are reporting for: [11] (Rev. 12/2009) REPORT (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party 4)County Central Committee (5)County Candidate (6)City Candidate (7)School Board or Other Political For Office Use Only Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (Local Ballot Issue Comm. # CANDIDATE COMMITTEES ONLY: Logged In Candidate Name Political Party (if applicable) Scanned Computer Office Sought District (if Senate or House) Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. 319-653-6561 SIGNATURE OF PERSON FILING REPORT TELEPHONE I AM FILING A October 14, 2010 REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. Indicate by # 1 ☐CHECK IF AMENDMENT TO REPORT DATED _ Local Committees, enter Date of Election November 2, 2010 ☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. County & Local Committees, enter County in (You must continue to file reports until a DR-3 is filed.) which Election is held Washington STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end 0.00of the last reporting period or must be zero if this is first report filed.)\$ ADD TOTAL MONEY TAKEN IN THIS PERIOD 200,000.00 Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 0.00 Schedule F: Loans Received total (Attach Schedule F)..... 0.00 Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) 200,000.00 SUB-TOTAL.....\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD 61,421.38 Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).......... 0.00 Schedule F: Loan Repayments total (Attach Schedule F)..... 138,578.62 CASH ON HAND at the end of this reporting period (if final report balance must be zero)\$ **UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ 28,357.03 *IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$ 10.278.75 **OUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$ 0.00 YES CONSULTANT BREAKDOWN (Schedule G Attached?) NO **CANDIDATE COMMITTEES ONLY:** 0.00 VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
		CK THIS BOX IF

COMMITTEE	NAME (Must be	same as on Statement	of Organization)
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Washington County Citizens for Good Jobs

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
7/21/2010	ID# CK#	Riverside Casino and Golf Resort 3184 Highway 22 Riverside, Iowa 52327	N/A	\$50,000.00	INCOME
10/12/2010	ID# CK#	Riverside Casino and Golf Resort 3184 Highway 22 Riverside, Iowa 52327	N/A	\$150,000.00	
	ID# CK#				
	ID#	·			
	ID#				
	CK#				
	CK#				
	CK#				
	ID# CK#			: : · ·	
	ID# CK#				
· <u>.</u>	ID#				
W.C. C	CK#		SUB-TOTAL	\$ 200,000.00	

TOTAL (if last page of this schedule)

Page 1 of 1 (for Schedule A)

\$ 200,000.0

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
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COMMITTEE NAME (Must be	cama	20.00	Ctatamant	-f 0 : !! !
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Washington County Citizens for Good Jobs

DATE	CANDIDATE	NAME AND ADDRESS TO WHOM	PURPOSE	AMOUNT
EXPENDED (MM/DD/YR)	ID NUMBER (if applicable) AND PAC CHECK NUMBER	EXPENDITURE (Disbursement) WAS MADE	(DESCRIBE TRANSACTION)	EXPENDED
08/17/2010	ID# CK#	Deluxe Checks Riverside, Iowa	Purchase checks for account	\$ 16.30
08/13/2010	ID# CK#_	Meredith Fisher 125 56th Place West Des Moines, IA 50266	Consultant Fee	1,750.00
08/28/2010	ID# CK# 5002	Landmark Strategies, Inc 6225 Brandon Avenue Springfield, VA 22150	Phone Survey	2,335.19
08/28/2010	ID# CK# ₅₀₀₁	The Adtrack Corporation 6060 Huntington Court NE Cedar Rapids, IA	Database and Campaign Management Services	1,850.00
08/31/2010	ID# CK# ₅₀₀₃	Meredith Fisher 125 56th Place West Des Moines, IA 50266	Consultant Fee	1,750.00
3/31/2010	ID# CK#5004	Meredith Fisher 125 56th Place West Des Moines, IA 50266	Mileage Reimbursement	31.00
09/08/2010	ID# CK# ₅₀₀₅	Sarahnbelphotography 1711 Orange Ave Riverside, IA 52327	Photography Editing Services	481.50
09/15/2010	ID# CK# 5006	Meredith Fisher 125 56th Place West Des Moines, IA 50266	Consultant Fee	1,750.00
			SUB-TOTAL	\$ 9,963.99
			TOTAL (if last page of this schedule)	\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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Page		of

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

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	SCHEDULE	
	B (Rev. 07/03)	MONETARY EXPENDITURES
	CHEC AME	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

	County Citizens	Maria de la companya		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/14/2010	ID# CK#5091	Victory Store. Com 5200 SW 30th St Davenport, IA 52802	Yard Signs	\$ 1,637.00
9/27/2010	ID# CK# 5007	Carter Printing 1739 East Grand Ave. Des Moines, IA 50316	Poly Bag Signs	3,990.90
9/27/2010	ID# CK# 5008	One Step 1704 N. Harrison Davenport, IA 52803	Mailers, Advertising, Postage	4,355.67
9/27/2010	ID# CK# ₅₀₀₉	David Binder Research 44 Page Street San Francisco, CA 94102	Telephone Survey	17,000.00
9/27/2010	ID# CK# ₅₀₁₀	Custom Impressions, Inc 110 West Main Street Washington, IA 52353	T-Shirts, Advertising	841.02
0/01/2010	ID# CK#5011	Meredith Fisher 125 56th Place West Des Moines, IA 50266	Consultant Fee	1,750.00
0/01/2010	ID# CK# ₅₀₁₂	Meredith Fisher 125 56th Place West Des Moines, IA 50266	Mileage Reimbursement	193.50
0/04/2010	ID# CK# 5013	J&A Postage Trust 1155 Sherman Road Hiawatha, IA 52233	Postage & Mailers	2,603.64
			SUB-TOTAL	\$ 32,371.73
			TOTAL (if last page of this schedule)	\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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2	1	- 3	
Page 2	•	of [©]	

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Washington County Citizens for Good Jobs

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/08/2010	ID# CK#5015	J&A Postage Trust 1155 Sherman Road Hiawatha, IA 52233	Advertising - Postage	\$ 180.24
10/11/2010	ID# CK# 5016	The Strategy Group, Inc 1603 Orrington Avenue Evanston, IL 60201	Messaging and design of flyers and newspaper advertising	9,500.00
0/13/2010	ID# CK# 5017	J&A Postage Trust 1155 Sherman Road Hiawatha, IA 52233	Advertising - Postage	2,603.37
0/13/2010	ID# CK# ₅₀₁₈	J&A Postage Trust 1155 Sherman Road Hiawatha, IA 52233	Advertising - Postage	3,287.93
0/14/2010	ID# CK# ₅₀₁₉	Meredith Fisher 125 56th Place West Des Moines, IA 50266	Consultant Fee	1,750.00
0/14/2010	ID# CK#5020	Meredith Fisher 125 56th Place West Des Moines, IA 50266	Reimbursement of Supplies and Snacks	160.12
0/14/2010	ID# CK# ₅₀₂₁	Slechta Communications 419 B. Ave Kalona, IA 52247	Advertising - Print Ads	1,604.00
	ID#			100
			SUB-TOTAL	\$ 19,085.66

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19,085.66

TOTAL (if last page of this schedule)

\$ 61,421.38

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page	3	of	. 3

COMMITTEE NAME (Must be same as on Statement of Organization)	
Washington County Citizens for Good Jobs	·
	

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.



D (Rev. 08/98)	INCURRED
	CK THIS BOX MENDING M

DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE		has bee	n received.
DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
10/14/2010	Washington Evening Journal 111 N. Marion Washington, IA 52352	Print Ad - Advertisement	\$ 2,468.28
10/14/2010	Wellman Advance PO Box 1 Wellman, IA 52356	Print Ad - Advertisement	888.75
10/14/2010	Link Strategies, LLC 321 E. Walnut Suite 321 Des Moines. IA 50309	General Consultant Services 7/2010 - 11/2010	25,000.00
			entral de la companya
		SUB-TOTAL	\$ 28,357.03
	TOTAL DEBTS OWED BY COMMITTEE A	AT THE END OF THIS REPORTING PERIOD	\$ 28,357.03

*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1

CANDIDATE COMMITTEES NOTE:

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, politing, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS,	SEE BACK OF FORM
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COMMITTEE NAME (Must be same as on Statement of Organization) Washington County Citizens for Good Jobs		SCHEDULE E (Rev. 06/97)	IN-KIND
	Reset Forms	L CHECK	OTHIS BOX IF DING FORM

RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET	√ IF FOR FUND-RAISE
07/2010 - 11	Riverside Casino and Golf Resort 3184 Highway 22 Riverside, Iowa 52327	N/A	Salary of Sharon Haselhoff	VALUE \$ 6,923.08	CONTRIBUTIO
07/2010 - 11	Riverside Casino and Golf Resort 3184 Highway 22 Riverside, Iowa 52327	N/A	Phone lines, office space, use of computers	3,000.00	
07/2010 - 11	Riverside Casino and Golf Resort 3184 Highway 22 Riverside, Iowa 52327	N/A	Employee time to assemble and put un vard signs. door	805.67	
			an variation. Color		
			•		
			SUB-TOTAL ;	10,728.75	
			page of this schedule)	10,728.75	• *** 1

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule E)

FOR INSTRUCTIONS, SEE BACK OF FORM SCHEDULE RESET COMMITTEE NAME(Must be same as on Statement of Organization) G.... BREAKDOWN OF MONETARY Washington County Citizens for Good Jobs (Rev. 02/08) **EXPENDITURES** BY CONSULTANT CHECK THIS BOX IF AMENDING FORM PART I - NAME AND ADDRESS OF CONSULTANT Name of Consultant Meredith Fisher Mailing Address 125 56th Place City State Zip Code West Des Moines, Iowa 50266 CONTRACT PERIOD (MM/DD/YR) TOTAL ANTICIPATED COMPENSATION FOR PERFORMANCE From August 1, 2010 November 15, 2010 14,000 + expense reimbursement **ESTIMATES OF PERFORMANCE** Coordinate advertising, door knockers, phone banks and campaign stops at local service organizations and events.

PART II- ITEMIZED BREAKDOWN OF UNREIMBURSED EXPENSES PAID BY CONSULTANT TO OTHERS IN PERFORMING SERVICES OF CONTRACT (These expenses should NOT be reported on Schedule B, as they are direct payment from the consultant.)

DATE EXPENDED (MM/DD/YR)	NAME AND ADDRESS TO WHOM EXPENDITUR (Disbursement) WAS MADE		AMOUNT EXPENDED
	none		\$ 0.00
		.,	* * * * * * * * * * * * * * * * * * *
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		SUB-TOTAL	\$ 0.00
		TOTAL (if last page of this schedule)	\$ 0.00

(for Schedule G)

TRESET

SCHEDULE G

(Rev. 02/08)

BREAKDOWN OF MONETARY **EXPENDITURES** BY CONSULTANT

CHECK THIS BOX IF

COMMITTEE NAME(Must be same as on Statement of Organization) Washington County Citizens for Good Jobs

PART I - NAME AND ADDRESS OF CONSULTAN	_	AMENDING FORM
Name of Consultant		
Link Strategies, LLC		
Mailing Address 321 E. Walnut, Suite 321		
Des Moines, Iowa 50309	tate ZIp Code	
CONTRACT PERIOD (MM/DD/YR)	TOTAL ANTICIPATED COMP	PENSATION FOR PERFORMANCE
From July 1, 2010 To November 15, 2010	\$ <u>25,000</u>	
ESTIMATES OF PERFORMANCE	,	
General consultant, overall	message and cam	paign design.

PART II- ITEMIZED BREAKDOWN OF UNREIMBURSED EXPENSES PAID BY CONSULTANT TO OTHERS IN PERFORMING SERVICES OF CONTRACT (These expenses should NOT be reported on Schedule B, as they are direct payment from the consultant.)

DATE EXPENDED (MM/DD/YR)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE		AMOUNT EXPENDED
	None		\$ 0.00
· · · · · · · · · · · · · · · · · · ·	orași de si incentrului de la companie de la compa		
		:	
		SUB-TOTAL	\$ 0.00
	en de la companya de La companya de la co	TOTAL (If last page of this schedule)	\$ 0.00

of 3 2 (for Schedule G)

RESET

COMMITTEE NAME(Must be same as on Statement of Organization)

SCHEDULE

G

BREAKDOWN OF MONETARY EXPENDITURES BY CONSULTANT

Washington County Citiz	zens for Goo	d Jobs	(Rev. 02/08) OF MONE EXPENDI BY CONSU
PART I - NAME AND ADDRESS OF CONSULTANT	1. The state of th		CHECK THIS BO AMENDING FOR
Name of Consultant Sheila Hanson			
Mailing Address 502 W. Main St.			
City State Washington, Iowa 52353	e Zip Code		
CONTRACT PERIOD (MM/DD/YR)	TOTAL ANTICIPATED O	OMPENSATION FOR PERFOR	MANCE
From Oct. 1, 2010 To Nov. 15, 2010		se reimbursement	
ESTIMATES OF PERFORMANCE			
Coordinate door knockers an	nd phone banks	in Washington pr	ecincts.
			The state of the s
ART II- ITEMIZED BREAKDOWN OF UNREIMBURSE DNTRACT (These expenses should NOT be reporte DATE EXPENDED NAME AND ADDRESS TO WH	d on Schedule B, as they	ONSULTANT TO OTHERS IN F are direct payment from the co	nsultant.)
(MM/DD/YR) (Disbursement) WA		PURPOSE	AMOUNT EXPENDED
None		Exercise 1	\$ 0.00
		•	

EXPENDED (MM/DD/YR)	NAME AND ADDRESS TO WHOM EXPENDITUR (Disbursement) WAS MADE	RE PURPOSE	AMOUNT EXPENDED
	None	F. 4. 4	\$ 0.00
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		SUB-TOTAL	\$ 0.00
		TOTAL (If last page of this schedule)	\$ 0.00

Page 3 3 of 3 (for Schedule G)